

Shipping List Number: 2018-0235-M

Ship List Date 8/30/2018
 Delivery Date 9/19/2018
 P.O. Number 32345
 Program 0562-S

PAGE 1 OF 1

Claims for nonreceipt of publications on this list under item numbers previously selected by a library must be made within 60 calendar days of receipt of this shipment. When filing a claim for missing **publications**, please circle on the list what is missing and mail, fax, or scan and email the list following the directions at the bottom. If emailing without a scan, please include the Shipping List No., Item No., Classification No., and Title of the material being claimed.

ITEM NO.	CLASSIFICATION NO.	TITLE
1011-A	Y 4.AP 6/1:H 75/2019/PT.2	DEPARTMENT OF HOMELAND SECURITY,... HRGS... PART 2... COM. ON APPROPRIATIONS, U.S. HOUSE OF REPS... 115TH CONGRESS, 2ND SESSION
	Y 4.AP 6/1:L 11/2019/PT.5	DEPARTMENTS OF LABOR, HEALTH AND HUMAN,... HRGS... PART 5... COM. ON APPROPRIATIONS, U.S. HOUSE OF REPS... 115TH CONGRESS, 2ND SESSION
1019-B-01	Y 4.C 73/8:115-113	LEGISLATIVE HEARING ON FOUR,... HRG... SERIAL NO. 115-113... COM. ON ENERGY AND COMMERCE, U.S. HOUSE OF REPS... 115TH CONGRESS, 2ND SESSION
1025-A-02	Y 4.SCI 2:115-25	STEM AND COMPUTER SCIENCE EDUCATION:... HRG... SERIAL NO. 115-25... COM. ON SCIENCE, SPACE, AND TECHNOLOGY, U.S. HOUSE OF REPS... 115TH CONGRESS, 1ST SESSION
	Y 4.SCI 2:115-55	COMPOSITE MATERIALS: STRENGTHENING,... HRG... SERIAL NO. 115-55... COM. ON SCIENCE, SPACE, AND TECHNOLOGY, U.S. HOUSE OF REPS... 115TH CONGRESS, 2ND SESSION
1035-A-02	Y 4.B 85/3:115-4	FAILURES OF FISCAL MANAGEMENT: A VIEW,... HRG... SERIAL NO. 115-4... COM. ON THE BUDGETS, U.S. HOUSE OF REPS... 115TH CONG., 1ST SESSION
	Y 4.B 22/3:S.HRG.115-258	TEN YEARS OF CONSERVATORSHIP: THE,... HRG... S. HRG. 115-258... COM. ON BANKING, HOUSING, AND URBAN AFFAIRS, U.S. SENATE... 115TH CONGRESS, 2ND SESSION

Number of Titles: 7

Claim by regular mail or email or fax:

MAIL CLAIMS TO: Data Management Internationale, Inc 55 Lukens Drive New Castle, DE 19720	EMAIL: gpoclaims@dm-i-inc.com	FAX: (302) 656-1169
--	---	-------------------------------

Signature of Librarian authorized to make claim _____ LIB# _____

CLEARLY PRINT OR TYPE ADDRESS AND INFORMATION ON MAILING LABEL

U.S. GOVERNMENT PUBLISHING OFFICE LIBRARY PROGRAMS SERVICES 9SLDM WASHINGTON, DC 20401 OFFICIAL BUSINESS	Lib # _____ SL # _____ Institution _____ Address _____ City _____ State _____ Zip _____
--	--